

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS4932CTC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/25/2009
NAME OF PROVIDER OR SUPPLIER WESTCARE COMMUNITY TRIAGE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 930 NORTH 4TH STREET LAS VEGAS, NV 89101		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. The survey was conducted using Nevada Administrative Code (NAC) 449, Community Triage Centers Regulations, adopted by the Nevada State Board of Health on July 14, 2006. This Statement of Deficiencies was generated as a result of the State Licensure survey conducted in your facility on 8/25/09. The facility is licensed for 50 Community Triage Center beds. Twenty-two employee files were reviewed, ten resident files were reviewed and one discharged resident file was reviewed. The following deficiencies were identified:	C 000		
C 120 SS=C	NAC 449.74329(2)(d) P&P for services and operation of facility NAC 449.74329 P&P for services and operation of facility. 2. The policies and procedures adopted pursuant to subsection 1 must: (d) Ensure that the admission agreement between the administrator and the patient specifically prohibits the administrator, his designee or any member of the staff of the facility from being given durable power of attorney for health care for the patient; and This Regulation is not met as evidenced by:	C 120		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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C 120	Continued From page 1 Based on record review on 8/25/09, the facility failed to ensure the admission agreement included a statement that indicated that the administrator, his designee or employees were prohibited from acting as power of attorneys for health care to residents. Severity: 1 Scope: 3	C 120		
C 160 SS=B	NAC 449.74335 Inventory of belongings of patient NAC 449.74335 Inventory of belongings of patient. If a facility holds or stores the belongings of a patient, there must be an inventory of the belongings on admission, made a part of the record of the patient and updated as needed. These belongings must be returned to the patient upon his exit. This Regulation is not met as evidenced by: Based on record review on 8/25/09, the facility failed to ensure that 3 of 10 residents had their belongings inventoried at admission (Resident #3, #5, and #9). Severity: 1 Scope: 2	C 160		
C 200 SS=C	NAC 449.74339(7) programs and services NAC 449.74339 programs and services. 7. A plan for case management must be recorded in the records of a patient and must be periodically evaluated in conjunction with the treatment plan of the patient. This Regulation is not met as evidenced by:	C 200		

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C 200	Continued From page 2 Based on record review on 8/25/09, the facility failed to ensure that case management plans were included in 5 of 10 resident files (Resident #1, #4, #5, #6, and #7). Severity: 1 Scope: 3	C 200		
C 270 SS=A	NAC 449.74341(2)(c) duties of administrator NAC 449.74341 duties of administrator. 2. The administrator shall: (c) Appoint a person who is qualified by education, experience and training to act as administrator in his absence. This Regulation is not met as evidenced by: Based on record review on 8/25/09, the administrator failed to appoint a person to act as the administrator in his absence. Severity: 1 Scope: 1	C 270		
C 295 SS=F	NAC 449.74343(3) P&P concerning employees NAC 449.74343 P&P concerning employees. 3. Each person employed in a facility must have a preemployment physical examination or certification of a 3-year health record from a physician, and be tested for tuberculosis as required in chapter 441A of NAC. This Regulation is not met as evidenced by: Based on record review on 8/25/09, the facility failed to ensure 3 of 22 employees complied with NAC 441A.375 regarding tuberculosis (TB).	C 295		

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C 295	Continued From page 3 Findings include: Employee #1 - The file contained a one-step TB skin test dated 6/19/09, but the file did not contain the required second step TB skin test. Employee #2 - The last TB skin test in the employee's file was dated 11/07. Employee #3 - The file contained a one-step TB skin test dated 4/18/09, but the file did not contain the required second step TB skin test. Severity: 2 Scope: 3	C 295		
C 305 SS=B	NAC 449.74343(4)(b) P & P concerning employees NAC 449.74343 P&P concerning employees. 4. Each facility shall: (b) Provide an orientation session to new employees. Documentation of the session must be maintained in the personnel file of the employee. This Regulation is not met as evidenced by: Based on record review on 8/25/09, the facility failed to provide documentation that 5 of 22 employees participated in an orientation session (Employee #9, #11, #12, #14, and #18). Severity: 1 Scope: 2	C 305		
C 355 SS=C	NAC 449.74343(4)(e)(2) P & P concerning employees NAC 449.74343 P&P concerning employees.	C 355		

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C 355	Continued From page 4 4. Each facility shall: (e) Maintain a personnel record for each employee of the facility. The record must include, without limitation: (2) Letters of recommendation; This Regulation is not met as evidenced by: Based on record review on 8/25/09, the facility failed to obtain letters of recommendation from 13 of 22 employees (Employee #1, #2, #3, #5, #7, #10, #14, #15, #18, #19, #20, #21 and #22). Severity: 1 Scope: 3	C 355		
C 505 SS=D	NAC 449.74347(9) Health services NAC 449.74347 Health services. 9. Staff providing patient care must be qualified by the American Red Cross or another similar nationally recognized agency to administer cardiopulmonary resuscitation. This Regulation is not met as evidenced by: Based on record review on 8/25/09, the facility failed to ensure 2 of 22 staff persons had training in cardiopulmonary resuscitation (Employee #15 and #19). Severity: 2 Scope: 1	C 505		
C 510 SS=F	NAC 449.74347(10) Health services NAC 449.74347 Health services. 10. Each patient of a facility must be tested for tuberculosis as required by the provisions of	C 510		

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C 510	Continued From page 5 chapter 441A of NAC. This Regulation is not met as evidenced by: Based on record review on 8/25/09, the facility failed to ensure 1 of 10 residents complied with NAC 441A.380 regarding tuberculosis (Resident #2 - missing second-step TB skin test). Severity: 2 Scope: 3	C 510		
C 810 SS=F	NAC 449.74359(8)(a) Dietary services NAC 449.74359 Dietary services. 8. A facility with more than 10 patients shall: (a) Comply with all applicable provisions of chapter 446 of NRS and the regulations adopted pursuant thereto; This Regulation is not met as evidenced by: Based on observation on 8/25/09, the facility failed to comply with the provisions of chapter 446 of NRS and NAC. Findings include: The following observations were made in the food preparation and food storage areas: - Equipment was pushed too close to the kitchen handsink making it difficult to wash hands. - Two cabinets in the hallway storing cans and dry food have worn paint on shelves and walls. - No temperature gauges were on the dishmachine. - Non-food contact surfaces have a film of	C 810		

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C 810	Continued From page 6 grease and dirt on them including the ice scoop handle and holder, the exterior of the ice machine, sink backsplashes, and racks used for clean kitchenware storage. The milk dispenser splash surfaces and the spray hose nozzle handle were also not clean. - Staff were stacking cleaned kitchenware while still wet. - The lid on the dumpster was open. - The floor in the food storage closet was not clean. - The walls throughout the kitchen, especially behind the two compartment sink, were not clean. Severity: 2 Scope: 3	C 810		
C 940 SS=F	NAC 449.74367(2)(c) Patients rooms;toilet and bathing facilities NAC 449.74367 Patients ' rooms; toilet and bathing facilities. 2. Each facility shall provide: (c) Mirrors in toilet and bathing facilities which are constructed of safety glass. This Regulation is not met as evidenced by: Based on observation on 8/25/09, the facility failed to ensure 3 of 3 resident bathroom mirrors were made of safety glass. Severity: 2 Scope: 3	C 940		

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